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## BIB DATA SHEET

CONFIRMATION NO. 2838

<b>SERIAL NUMBER</b> 10/761,557	<b>FILING or 371(c) DATE</b> 01/21/2004 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1635	<b>ATTORNEY DOCKET NO.</b> Nwestern-08739		
<b>APPLICANTS</b> D. James Surmeier, Chicago, IL; Tatiana Tkatch, Chicago, IL; Gytis Baranauskas, Chicago, IL; <b>** CONTINUING DATA *****</b> This appln claims benefit of 60/441,375 01/21/2003 <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b> 04/26/2004						
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /KIMBERLY CHONG/ Acknowledged Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> IL	<b>SHEETS DRAWINGS</b> 0	<b>TOTAL CLAIMS</b> 16	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> Casimir Jones, S.C. 440 Science Drive Suite 203 Madison, WI 53711 UNITED STATES						
<b>TITLE</b> Manipulation of neuronal ion channels						
<b>FILING FEE RECEIVED</b> 493	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		